CIHR– Institute of Population & Public Health

Pop News

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Message from the Scientific Director

Shining the Light on Population-level Intervention Research

In this issue of POP news, we shine the light on the importance of intervention research and the work of IPPH-funded researchers. Understanding the effects of policy and program interventions and the different contexts in which these are implemented is at the core of this new science of intervention research. It presents an opportunity to respond to the growing needs of practitioners and policy makers for evidence on the impacts of such policies and programs and how they can be improved to benefit population health status.

Dr. Penny Hawe, Institute Advisory Board and recent recipient of a novel Centres for Research Development Grant focussed on the impacts of physical and social environments on health regales us with her insights on the subject matter. We are also delighted to feature an article highlighting the budding linkages being forged between two IPPH-funded Centres (in Alberta and Atlantic Canada), both interested in strengthening our knowledge base to inform the effectiveness of school-based interventions.

We are pleased to be partnering again with the Institute of Health Services and Policy Research and collaborators in the Atlantic Region (SafetyNet and the Eastern Canada Consortium on Workplace Health and Safety based at Memorial University of Newfoundland, the RURAL Centre for Research Development and the Atlantic Network for Prevention Researchers based at Dalhousie University, and the Atlantic Regional Training Centre based in all four provinces) to offer another Summer Institute for students at the masters and doctoral levels. This year's Summer Institute will be held in Newfoundland and will place special emphasis on the following themes: rural and remote health and community-based research. Please refer to page 3 for more information.

In this issue, you will also find our usual updates on recently funded research projects and funding opportunities of interest to population and public health researchers. We would like to particularly draw your attention to the "Population and Public Health Methods and Tools" RFA, developed in response to the expressed need to further strengthen and refine the tools underlying PPH research (registration deadline: May 1st, 2005. Refer to page 2 for more details).

Please do email us your thoughts on this issue and past issues of POP news. We very much welcome your feedback and suggestions to inform future newsletter content.

Warm regards,

John Frank,
Scientific Director

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CALL FOR ABSTRACTS

Knowledge Translation Casebook
Case Abstracts Due: March 18, 2005

IPPH, in collaboration with the Canadian Population Health Initiative (CPHI) is pleased to announce the call for abstracts for a knowledge translation casebook. This call is intended to solicit case abstracts of knowledge translation (KT) 'stories' or 'cases' that illustrate both successful and unsuccessful examples of the collaborative development and practical use of population and public health research evidence. CIHR intends to use the selected cases for educational purposes and to publish and distribute a Knowledge Translation Casebook. The core aims of this call are to encourage and recognize knowledge translation activity, provide a vehicle for publishing and sharing knowledge translation 'stories', provide concrete KT examples for training purposes, and demonstrate the potential impact of research evidence. Please see: http://www.cihr-irsc.gc.ca/e/26460.html

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Getting Excited about Intervention Research

An Article Written by Dr. Penny Hawe

Three times in the last three years I have been wheeled out to give a plenary talk called "Great failures in health promotion." I have tried not to take this personally. I am sure that well intended conference organisers do not wish to convey the idea that there is something about me in particular that lends authenticity to this topic. But the topic is close to my heart. Because, as a result of a special initiative of the IPPH, a team of us based in Calgary have been newly funded by CIHR to develop a collaborative centre focused entirely on interventions in social and physical environments. Intervention research currently occupies only a small place in all population health research.[1] We hope to redress this.

What's so special about intervention research?
Intervention research is important not just because it takes us closer to improving health in populations. Intervention research challenges the way we think. In 1993 Ken McLeroy and colleagues suggested that the "theory of the problem" is not the same as the "theory of the solution"[2] or in other words, intervention theory is not simply aetiological theory in reverse. It's more complicated than that. When we think "A" leads to "B" and "C," but "D" happens instead all types of assumptions have to be reviewed.

A particular challenge is to break out of ways of thinking that are too individual and remedial to make a substantive difference to a problem. This must change if we are to really make an impact on the population we profess to serve. Too often in population health we see macro level analyses of problems coupled with micro level solutions - such as a structural analysis of health disparity coupled with recommendations for health education programs in schools. Maybe this is because too many of us are trained in the traditional helping professions – where individual and small group interventions are familiar, but policy and system-level interventions seem beyond reach.

A newly funded collaboration on complex interventions
Our Centre brings together 17 investigators in Canada, USA, UK and Australia to strengthen the design and evaluation of population-level preventive interventions. All of us are working on interventions in a range of areas, such as housing, nutrition, road safety, adolescent health and early childhood. We aim to function like a self help group. Investigators bring their projects as case studies to allow us to interrogate, and potentially strengthen, the intervention design and the methods being used to detect effects and sort out context-intervention interaction.

The work is organized around four themes – (1) intervention theory; (2) understanding the role of context in explaining intervention effects; (3) ethics and community partnership issues; and (4) the economics of social and community level interventions. The disciplinary areas include epidemiology, psychology, sociology, education, mathematics, statistics, economics and history and philosophy of science.

The products of our interactions are intended to be materials, protocols and ways of practice that can be disseminated to other researchers, policy makers and practitioners. "Theory products" will be books and papers. We are writing a paper series challenging researchers and practitioners to rethink intervention theory – in particular, to make a switch from program thinking to system thinking. "Training products" are things like short courses, an interactive webpage on community

Continued on page 3...

Population and Public Health Research Methods and Tools - Pilot Project Grants

A Request for Applications launched by the Institute of Population and Public Health

The purpose of this Request for Applications is to support research that enables the development and refinement of qualitative and/or quantitative research methods and tools that are applicable to population and public health (PPH) research and that specifically address one or more of the Institute's strategic research priorities. It is expected that this targeted investment will strengthen and refine the methods and tools that underpin PPH research ultimately leading to improvements in the health of all Canadians. For more information, please visit the CIHR website at http://www.cihr-irsc.gc.ca/e/25524.html

Continued from page 2...

intervention research and a glossary on complexity theory. The need for protocols and procedures arose when members of our collaboration pointed out that community intervention trials don't as yet have starting or stopping rules, process evaluation monitoring committees or ways to guide consumer involvement in large scale community intervention studies. There are plenty examples of preventive interventions doing more harm than good, so these are issues that researchers must take seriously.

Our methods are diverse. They range from natural experiments to cluster randomised community intervention trials. We have a major project using narrative methods to understand "indigenous theory" or natural cause-and-consequence thinking in the hands of intervention change agents. We are using inter-organisational network analysis to tease out the difference local collaborative relationships among community agencies might make to a community intervention's outcomes. The economists are leading work examining the way people in communities value the benefits of community-wide interventions. We are finding out that people are less 'selfish' than most people might believe. That is, people value and would be willing to pay (in terms of their own tax dollars) for interventions that transform properties of social and physical environments in ways that benefit others, but not necessarily themselves, directly.

Want to find out more?
We are in the process of establishing our webpage and network of "friends" who may wish to contribute to our research agenda and share some benefits. Contact David Casey at dcasey@ucalgary.ca

Penny Hawe PhD is the Director of the CIHR International Collaborative Centre for the Study of Social and Physical Environments and Health. She is Professor and Markin Chair in Health and Society at the University of Calgary.

References

1. Rychetnik L, Nutbeam D, Hawe P. Lessons from a review of publications in three health promotion journals from 1989-1994. Health Education Research 1997;12(4):491-504

2. McLeroy KR, Steckler AB, Simons-Morton B, Goodman RM, Gottlieb N, Burdine JN. Social science theory in health education: time for a new model? Health Education Research 1991;8(3):305-312

2005 Summer Institute

"Rural and Remote Health Research: Rhetoric and Reality"

JUNE 05 - 10, 2005
Rocky Harbour, Newfoundland

Background
The 2005 Summer Institute will be jointly hosted by SafetyNet and the Eastern Canada Consortium on Workplace Health and Safety based at Memorial University of Newfoundland, the RURAL Centre for Research Development and the Atlantic Network for Prevention Researchers based at Dalhousie University, and the Atlantic Regional Training Centre based in all four provinces. This is the 4th annual Summer Institute funded by the CIHR Institutes of Health Services and Policy Research (IHSPR) and Population and Public Health (IPPH).

Aim / Objectives
The aim of the 2005 Summer Institute is to provide a complementary training opportunity to students in applied health services and policy and/or population and public health research across disciplines, sectors, and institutions, by bringing together researchers, decision-makers and community learners from across Canada.

Participants will:

- Explore the challenges of planning and carrying out interdisciplinary applied and community-linked research in rural and remote settings;
- Discuss a range of population and public health and health services and policy issues that reflect the diversity of the populations living in rural and remote parts of Canada;
- Network with other young researchers as well as with mentors experienced in conducting interdisciplinary research and in making policy, administrative, clinical and public health decisions that impact Canada's rural and remote areas.

For more information, please visit the IPPH website at http://www.cihr-irsc.gc.ca/e/26600.html

New Developments in School Health Research in Canada

An Article Written by Dr. Laura Ghali and Dr. Donna Murnaghan

There is a strong relationship between the way in which schools function as organizations and the health behaviours of students. The school can be both a risk and a resource for the development of students' health and well-being. Students who have a negative perception of school are more likely to be underachieving academically and are at greater risk of adopting unhealthy behaviours. Two newly formed CIHR-IPPH Centres in Alberta and Atlantic Canada are building capacity for school health research to create healthier school environments. With the exception of family, schools have more influence on children and youth than any other social institution and provide an ideal context for prevention research.

In Atlantic Canada, Dr. Renee Lyons and her team have formed The Atlantic Network for Prevention Research with educators, policy makers, researchers and community partner alliances to work collaboratively on their project entitled Environmental Diagnostics for Illness and Injury Prevention. Donna Murnaghan is the PI for the school health research component and along with Shirliana Bruce (Project Coordinator), they will work to facilitate knowledge exchange and research capacity. The focus of the school health component is on developing an inter-sectoral team of researchers and educators to assess the status of prevention research and resources in schools. The Centre will also help to build research partnerships in the education systems to promote better comprehensive school health practices. "Currently, we have strong relationships with schools and we hope to identify system level structures that will enhance our ability to conduct quality research. We also want to identify ways to decrease the burden on schools and ensure that dedicated teaching time and resources are not wasted. Our goals are to build trusting relationships among all partners, develop consensus across the team about best practices, and determine how to integrate intervention activities," stated Dr. Lyons.

"In response to the school board's desire for local data, we plan to use reports that feed back information directly to each school. Some of the strategies we have planned include building a comprehensive inventory of school health research interventions and developing a model for system-linked prevention research infrastructure. For example, our Centre will offer a training workshop on Better Practices for School Health Research for researchers and policy makers in Atlantic Canada. We also plan to work collaboratively with the Calgary Centre on areas of mutual interest and will benefit from knowledge exchange opportunities provided by the CIHR grants," added Donna Murnaghan.

The focus of the Centre at the University of Calgary is on the social environment of schools and the design and evaluation of whole-school interventions that improve outcomes for students and enhance work satisfaction for teachers and other staff members. "This is not just about doing more research, we want to create more 'research literacy' in school health," explained Laura Ghali who is heading up the schools research program. "By this we mean that we would like school boards and health regions to become more aware that not every intervention called 'health promotion' works, and that some programs can even do more harm than good. We want people to become as engaged and discriminating about prevention programs in schools as they are about making health care decisions for themselves."

The Centre is using innovative research methods like social network analysis to capture properties of social environments in schools and to better understand how health programs and social context interact. "The school is workplace as well as a learning environment. If we can better understand how this setting impacts health and how to involve staff and students more in improving it, we may be able to create more effective and sustainable interventions," Dr. Ghali continued.

The CIHR Centre for the Study of Social and Physical Environments in Calgary is headed up by Dr. Penny Hawe, and is part of an international collaboration on complex interventions in population research linking investigators in Canada, USA, Australia and the UK. Dr. David Casey has been appointed as the Centre's Policy and Practice Partnerships Coordinator and is involved in planning a School Health Research Symposium (April 25-26/04 - Edmonton, Alberta). The focus of the symposium will be Creating and Sustaining Healthy ***School Communities***. Contact dcasey@ucalgary.ca for details.

Towards a Research Agenda for Mental Health in the Workplace

CIHR INSTITUTES COMMIT $650K PER YEAR FOR 5 YEARS

As of the end of December 2004, CIHR'S Institute of Population and Public Health, Institute of Neuroscience, Mental Health and Addiction and the Institute of Gender and Health have committed a minimum of $650K per year for 5 years. A Request for Applications will be posted in June 2005 and the first funds will start to flow to successful teams in fiscal year 2005. There is the possibility of a second call for applications in June 2006 for which funds will flow in fiscal year 2007.

FIRST ANNUAL CONGRESS: WORKPLACE MENTAL HEALTH RESEARCH - A PLATFORM FOR ACTION, JUNE 2-3, 2005 IN MONTREAL, QUEBEC

The Institut national de sante publique du Quebec, in collaboration with CIHR is launching a conference on mental health in the workplace to bring together researchers and stakeholders. The conference is part of a momentum building effort to implement the research agenda on mental health and the workplace developed around a workshop convened by CIHR in Spring 2004 in Toronto. For more information, please visit the website at www.inspq.qc.ca/SanteMentaleTravail

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PPH Researcher Profile

Randy Fransoo,
PhD Candidate in Community Health Sciences,
University of Manitoba

My interest in population health developed after starting work as a Research Coordinator at the Manitoba Centre For Health Policy (MCHP) in 1995. That early interest has grown into a passion, and I've gradually advanced into the role of Researcher.

Several Canadian provinces (Manitoba in particular) have excellent administrative databases for the kind of population health research that MCHP has done for almost 15 years. It is therefore incumbent on researchers to take up the opportunities and responsibilities of doing so. These population datasets provide important new perspectives and empirical answers to questions old and new. One of our recent reports revealed that the social gradient in *educational* outcomes (test scores and graduation rates) is considerably steeper than previously documented. The existence of the gradient was not news – what was surprising was just how steep the gradient is. It was the combination of education data and the health registry file that allowed 'the whole truth' to be revealed (see umanitoba.ca/centres/mchp, and click on Child Health Atlas). This work has led to many discussions with educators, administrators, policy makers from government departments of education and family services, and other groups from school trustees to the Social Planning Council of Winnipeg, the United Way, and the Business Council. Education is a key social determinant of health, and we are committed to further research in this area. The objective of my dissertation research is to quantify how children's health status at birth and in the early years affects their performance in school.

I am privileged to work with two outstanding mentors: my academic supervisor Dr. Noralou Roos, founding (former) Director of MCHP, now Senior Researcher, and Dr. Patricia Martens, currently Acting Director of MCHP, and member of my advisory committee. Both are models of how to conduct ethical research of outstanding quality, grounded in real-world policy issues.

I was fortunate to participate in IPPH's inaugural Summer Institute in 2002 – an experience none of the attendees will soon forget (particularly John Frank's insightful comparison of graduate students and beavers). The connections made there established relationships with other students and faculty from across the country that will last for years to come.

I also have a decent sense of humour and a former life as an Industrial Engineer with Nortel, which I abandoned in the idyllic pursuit of higher learning (well before the $125 stock drop and my inevitable layoff). My student life has been conducted in my spare time, between work for MCHP and life with my remarkable wife Alison, and sons Ben (8) and Will (5).

Mapping the Future of Public Health: People, Places and Policies

The Canadian Public Health Association's 96th Annual Conference and Call for Abstracts
Deadline - March 4, 2005

PhD and Post-Doctoral Fellowships

A Transdisciplinary Training Program in Public Health Research led by the Québec Population Health Network (http://www.santepop.qc.ca/training/)

Deadline - March 18, 2005

Pop News Evaluation: How are We Doing?

As **Pop News** is now at the end of its second year of publication, the IPPH staff would like to know whether or not it is meeting your needs. After reading this issue, could you please assist in evaluating **Pop News** by clicking on the link below and answering the subsequent questions. Your feedback is much appreciated.
http://www.feedbackform.ca/

Recently Funded Initiatives

Global Community of Practice in Ecosystem Approaches to Human Health Program Development Grants - Ecohealth Research (Letter of Intent Stage) - The Global Health Research Initiative (GHRI), a joint parallel initiative by the International Development Research Centre (IDRC) and CIHR, recently funded 8 projects to encourage researchers from Canada and the Latin America and the Caribbean region (LAC) to jointly develop and submit proposals that will contribute to the consolidation and expansion of a global Community of Practice in Ecohealth (COPEH) in LAC. The aim of this community of practice (CoP) is to advance the ecosystem approaches to human health research framework (concepts, methods and tools) and to strengthen the links between research, policy and action. For a complete listing of funded applications, please visit the following site:
http://www.cihr-irsc.gc.ca/e/25712.html

Facing our Future: Human Genetics, Ethics, Law and Society— CIHR's Institute of Genetics (IG), IPPH and Institute of Human Development, Child and Youth Health (IHDCYH) recently funded 5 projects to stimulate and promote single-discipline and interdisciplinary research by new investigators alone or collaboratively, in one or more of four specified areas, that address work on the ethical, legal and social aspects of genetics (particularly population based genetics and genetic epidemiology), and to determine the best direction for future research, policy and practice in one or more of these four specified areas. For a complete listing of funded applications, please visit the following site: http://www.cihr-irsc.gc.ca/e/25681.html

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IPPH Funding Opportunities

IPPH is pleased to announce the following upcoming funding opportunities:

Population and Public Health Research Methods and Tools - Pilot Project Grants (led by CIHR – Institute of Population and Public Health)
Launch: December 2004
Deadlines: Registration - May 1, 2005; Full Application – June 1, 2005

Reducing Health Disparities and Promoting Equity for Vulnerable Populations- Inter-disciplinary Capacity Enhancement Grants
(led by CIHR – Institute of Gender and Health)
Launch: December 2004
Deadlines: Letter of intent - May 1, 2005; Full Application – November 1, 2005

Scoping Reviews and Research Syntheses: Priority Health Services and System Issues (led by CIHR – Institute of Health Services and Policy Research)
Launch: December 2004
Deadlines: Registration - May 1, 2005; Full Application – June 1, 2005

IPPH Publications

The following Publications are available in both print and electronic form. To download a .pdf or .html file of these documents, please visit our website at http://www.cihr-irsc.gc.ca/institutes/ipph/publications/index_e.shtml

Mapping and Tapping the Wellsprings of Health,
Strategic Plan 2002-2007—Full Plan and Executive Summary

Institute of Population and Public Health Annual Reports

Charting the Course Progress Report: Two Years Later: How Are We Doing?

Building Public Health Research, Education and Development in Canada: A Five-Site Consultation

Establishing a Long-term Agenda for Workplace Mental Health Research

The Future of Public Health in Canada: Developing a Public Health System for the 21st Century